BCPharmaCare *Newsletter*

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Please circulate among dispensing staff.

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Suspension of Sales of Bextra™ in Canada

On April 7, 2005, Health Canada announced that it had asked Pfizer to voluntarily suspend sales of Bextra™ (valdecoxib) in Canada until safety issues are resolved. In response, Pfizer suspended sales of the COX-2 Selective Inhibitor and issued a letter to pharmacies regarding patient reimbursements and inventory returns.

PharmaCare Special Authorities for Bextra™ were no longer issued as of April 7, 2005, and existing Special Authorities were subsequently terminated. PharmaCare recommends that patients contact their physician to discuss discontinuing use and alternative treatments.

Background

The Therapeutics Initiative (TI), established in 1994 by the Department of Pharmacology and Therapeutics in cooperation with the Department of Family Practice at the University of British Columbia, provides physicians and pharmacists with up-to-date, evidence-based, practical information on rational drug therapy. The TI is an independent organization, which is at arms length from the government, the pharmaceutical industry and other vested interest groups.

The TI acts in an advisory capacity to PharmaCare with respect to clinical drug reviews excluding new chemical entities and new combination products.

In its Therapeutics Letter (Issue 43, November/December 2001), the TI concluded that, based on FDA data from the CLASS and VIGOR studies, COX-2 selective inhibitors were associated with an increased incidence of serious adverse events as compared to non-selective NSAIDs.

In a later Therapeutics Letter (Issue 53, July/October 2004), the TI concluded that a review of the 2004 monographs for COX-2 medications do not dispute their earlier findings.

When PharmaCare originally listed valdecoxib, it made it available only through PharmaCare's Special Authority process, subject to stringent criteria.

Special Services Fees

The number of Special Services fees paid by PharmaCare over the past twelve months are:

DATE	NO. OF FEES	DATE	NO. OF FEES
Apr 2005	3,244	Oct 2004	3,513
Mar 2005	2,888	Sep 2004	3,415
Feb 2005	2,618	Aug 2004	3,099
Jan 2005	2,418	Jul 2004	3,096
Dec 2004	3,885	Jun 2004	3,401
Nov 2004	3,720	May 2004	3,206

Low Cost Alternative (LCA) Program / Reference Drug Program (RDP) Updates

New Drugs Categorized to LCA and/or RDP

The following newly-approved benefits have been added to existing LCA/RDP categories as eligible benefits for Plans B, C, F, I, and, if applicable, Plan G. (For the Plan G formulary, please visit Special Authority Information page of the PharmaCare Web site.)

DIN	MAN	DRUG NAME	LCA STATUS	RDP	SPECIAL AUTHORITY ONLY
2256134	APX	APO-BISOPROLOL TAB 5MG	F		
2256177	APX	APO-BISOPROLOL TAB 10MG	F		
2244888	APX	APO-FAMOTIDINE INJ 10MG/ML (WOP)	P		
2256495	APX	APO-LEFLUNOMIDE TAB 10MG	F		Y
2256509	APX	APO-LEFLUNOMIDE TAB 20MG	F		Y
2255421	UNK[1]	ASA, ENTERIC COATED ASA TAB 325MG (**Plan B only**)	P		
2255464	UNK[1]	ASA, ENTERIC COATED ASA TAB 650MG	P		
2245828	UNK[2]	CLASTEON® CAP 400MG	F		
2255545	OBT	CO ATENOLOL TAB 50MG	P		
2255553	OBT	CO ATENOLOL TAB 100MG	P		
2248686	OBT	CO ETIDRONATE TAB 200MG	F		
2255529	OBT	CO FLUVOXAMINE TAB 50MG	P		
2255537	OBT	CO FLUVOXAMINE TAB 100MG	P		

1 — GFR Pharma

2 — Oryx Pharmaceuticals Inc.

New Drugs Categorized to LCA and/or RDP (*continued*)

DIN	MAN	DRUG NAME	LCA STATUS	RDP	SPECIAL AUTHORITY ONLY
2256142	OBT	CO GABAPENTIN CAP 100MG	P		Y†
2256150	OBT	CO GABAPENTIN CAP 300MG	P		Y†
2256169	OBT	CO GABAPENTIN CAP 400MG	P		Y†
2248572	OBT	CO LOVASTATIN TAB 20MG	P		
2248573	OBT	CO LOVASTATIN TAB 40MG	P		
2250012	OBT	CO MELOXICAM TAB 7.5MG	F		Y
2250020	OBT	CO MELOXICAM TAB 15MG	F		Y
2257726	OBT	CO METFORMIN TAB 500MG	P		
2257734	OBT	CO METFORMIN TAB 850MG	P		
2262754	OBT	CO PAROXETINE TAB 20MG	F		
2262762	OBT	CO PAROXETINE TAB 30MG	F		
2254727	OBT	CO TERBINAFINE TAB 250MG	P		Y
2246624	SEV	COVERSYL® (perindopril erbumine) TAB 8MG	P	RDP	Y
2247735	OMG	FAMOTIDINE OMEGA INJ 10MG/ML (WOP)	P		
2247745	OMG	FAMOTIDINE OMEGA INJ 10MG/ML (WP)	P		
2246183	UNK[1]	FERROUS GLUCONATE TAB 300MG	F		
2258331	GPM	GEN-CLINDAMYCIN CAP 150MG	P		
2258358	GPM	GEN-CLINDAMYCIN CAP 300MG	P		
2265133	GPM	GEN-DIVALPROEX TAB 125MG	P		
2265141	GPM	GEN-DIVALPROEX TAB 250MG	P		
2265168	GPM	GEN-DIVALPROEX TAB 500MG	P		
2262401	GPM	GEN-FOSINOPRIL TAB 10MG	P*	RDP	Y
2262428	GPM	GEN-FOSINOPRIL TAB 20MG	P*	RDP	Y
2265494	GPM	GEN-LAMOTRIGINE TAB 25MG	P		Y†
2265508	GPM	GEN-LAMOTRIGINE TAB 100MG	P		Y†
2265516	GPM	GEN-LAMOTRIGINE TAB 150MG	F		Y†
2255987	GPM	GEN-MELOXICAM TAB 7.5MG	F		Y
2255995	GPM	GEN-MELOXICAM TAB 15MG	F		Y

P* — Drug is a full benefit if RDP special authority is in place.

† — Plan G coverage requires Special Authority.

1 — GFR Pharma

New Drugs Categorized to LCA and/or RDP (*continued*)

DIN	MAN	DRUG NAME	LCA STATUS	RDP	SPECIAL AUTHORITY ONLY
2256118	GPM	GEN-MIRTAZAPINE TAB 30MG	P		
2244563	GPM	GEN-NABUMETONE TAB 500MG	P	RDP	Y
2245372	GPM	GEN-PROPAFENONE TAB 150MG	P		
2245373	GPM	GEN-PROPAFENONE TAB 300MG	P		
2231457	ABB	MAVIK® (trandolapril) CAP 0.5MG	F	REF	
2251558	NOP	NOVO-CITALOPRAM TAB 20MG	P		
2251566	NOP	NOVO-CITALOPRAM TAB 40MG	P		
272434	NOP	NOVO-DIPAM TAB 2MG	P		
272442	NOP	NOVO-DIPAM TAB 5MG	F		
2258315	NOP	NOVO-MELOXICAM TAB 7.5MG	F		Y
2258323	NOP	NOVO-MELOXICAM TAB 15MG	F		Y
2261898	NOP	NOVO-METOPROL TAB 25MG	P		
2259354	NOP	NOVO-MIRTAZAPINE TAB 30MG	F		
21512	NOP	NOVO-PRAMINE TAB 25MG	P		
21520	NOP	NOVO-PRAMINE TAB 50MG	P		
37427	NOP	NOVO-TRIPTYN TAB 50MG	P		
2265273	NOP	NOVO-WARFARIN TAB 1MG	P		
2265281	NOP	NOVO-WARFARIN TAB 2MG	P		
2265303	NOP	NOVO-WARFARIN TAB 2.5MG	P		
2265311	NOP	NOVO-WARFARIN TAB 3MG	P		
2265338	NOP	NOVO-WARFARIN TAB 4MG	P		
2265346	NOP	NOVO-WARFARIN TAB 5MG	P		
2247490	PMS	PMS-DIAZEPAM TAB 2MG	F		
2247491	PMS	PMS-DIAZEPAM TAB 5MG	F		
2247492	PMS	PMS-DIAZEPAM TAB 10MG	F		
2255944	PMS	PMS-FOSINOPRIL TAB 10MG	P*	RDP	Y
2255952	PMS	PMS-FOSINOPRIL TAB 20MG	P*	RDP	Y
2247493	PMS	PMS-FUROSEMIDE TAB 20MG	P		
2247494	PMS	PMS-FUROSEMIDE TAB 40MG	P		

P* — Drug is a full benefit if RDP special authority is in place.

New Drugs Categorized to LCA and/or RDP (*continued*)

DIN	MAN	DRUG NAME	LCA STATUS	RDP	SPECIAL AUTHORITY ONLY
2255898	PMS	PMS-GABAPENTIN TAB 600MG	P		Y†
2255901	PMS	PMS-GABAPENTIN TAB 800MG	P		Y†
2247386	PMS	PMS-HYDROCHLOROTHIAZIDE TAB 25MG	F		
2247387	PMS	PMS-HYDROCHLOROTHIAZIDE TAB 50MG	F		
2252570	PMS	PMS-OFLOXACIN OPHTH SOL 0.3%	P		Y
2252619	PMS	PMS-SIMVASTATIN TAB 5MG	F		
2252678	PMS	PMS-SIMVASTATIN TAB 80MG	F		
2252112	RPH	RATIO-CITALOPRAM TAB 20MG	P		
2252120	RPH	RATIO-CITALOPRAM TAB 40MG	P		
2250039	RPH	RATIO-FENOFIBRATE MC CAP 200MG	P		
2260883	RPH	RATIO-GABAPENTIN CAP 100MG	P		Y†
2260891	RPH	RATIO-GABAPENTIN CAP 300MG	P		Y†
2260905	RPH	RATIO-GABAPENTIN CAP 400MG	P		Y†
2248543	ORG	REMERON RD™ TAB 30MG	F		
2257599	RXP	RHOXAL-ACEBUTOLOL TAB 100MG	P		
2257602	RXP	RHOXAL-ACEBUTOLOL TAB 200MG	P		
2257610	RXP	RHOXAL-ACEBUTOLOL TAB 400MG	P		
2254719	RXP	RHOXAL-GLICLAZIDE TAB 80MG	P		Y
2257564	RXP	RHOXAL-LOPERAMIDE TAB 2MG	P		Y
2254751	RXP	RHOXAL-PAROXETINE TAB 20MG	F		
2254778	RXP	RHOXAL-PAROXETINE TAB 30MG	F		
2257831	RXP	RHOXAL-SOTALOL TAB 80MG	P		
2257858	RXP	RHOXAL-SOTALOL TAB 160MG	P		
2257572	RXP	RHOXAL-ZOPICLONE TAB 5MG	P		Y
2257580	RXP	RHOXAL-ZOPICLONE TAB 7.5MG	P		Y
2247691	SIL	SAB-ANUZINC HC OINTMENT 0.5%-0.5%	F		
2249294	TAR	TARO-FLUCONAZOLE TAB 50MG	P		Y
2249308	TAR	TARO-FLUCONAZOLE TAB 100MG	P		Y

† — Plan G coverage requires Special Authority.

New Drugs Categorized to LCA and/or RDP (*continued*)

DIN	MAN	DRUG NAME	LCA STATUS	RDP	SPECIAL AUTHORITY ONLY
2242275	PMS	TIMOLOL MALEATE OPHTHALMIC GEL FORMING SOLUTION 0.25%	F		
2242276	PMS	TIMOLOL MALEATE OPHTHALMIC GEL FORMING SOLUTION 0.50%	F		

New LCA Categories

Please be advised that the following drugs (including both existing PharmaCare benefits and new PharmaCare benefits) will be included as new LCA Categories on PharmaNet, effective **June 20, 2005**.

NEW CATEGORY (CHEMICAL NAME)	DIN	MAN	BRAND NAME	LCA STATUS	PRICE
AMITRIPTYLINE TAB 10MG	37400	NOP	NOVO-TRIPTYN TAB 10MG	F	
	335053	APX	APO-AMITRIPTYLINE TAB 10MG	F	
AMITRIPTYLINE TAB 25MG	37419	NOP	NOVO-TRIPTYN TAB 25MG	F	
	335061	APX	APO-AMITRIPTYLINE TAB 25MG	F	
ATENOLOL/ CHLORTHALIDONE TAB 50MG/25MG	2248763	APX	APO-ATENIDONE TAB 50MG/25MG	F	
	2049961	AZC	TENORETIC® TAB 50MG/25MG	P	$0.4508
ATENOLOL/ CHLORTHALIDONE TAB 100MG/25MG	2248764	APX	APO-ATENIDONE TAB 100MG/25MG	F	
	2049988	AZC	TENORETIC® TAB 100MG/25MG	P	$0.5316
*BUPROPION HCL TAB 150MG	2260239	NOP	NOVO-BUPROPION SR TAB 150MG	F	
	2237825	UNK[1]	WELLBUTRIN® SR TAB 150MG	P	$0.5813
*CIPROFLOXACIN HCL OPHTH SOLUTION 0.3%	2253933	PMS	PMS-CIPROFLOXACIN OPHTH SOL 0.3%	F	
	1945270	ALC	CILOXAN® DROPS 0.3%	P	$1.1708
CLONIDINE HCL TAB 0.025MG	2248732	APX	APO-CLONIDINE TAB 0.025MG	F	
	519251	BOE	DIXARIT® TAB 0.025MG	P	$0.1886
DIAZEPAM TAB 10MG	272450	NOP	NOVO-DIPAM TAB 10MG	F	
	2247492	PMS	PMS-DIAZEPAM TAB 10MG	F	
	405337	APX	APO-DIAZEPAM TAB 10MG	P	$0.0900
	434388	PDL	DIAZEPAM TAB 10MG	P	$0.0900
	13773	UNK[2]	VIVOL® TAB 10MG	P	$0.0900

* — Requires Special Authority (please refer to the PharmaCare Web site for criteria).

1 — Biovail

2 — Axxess Pharma

New LCA Categories (*continued*)

NEW CATEGORY (CHEMICAL NAME)	DIN	MAN	BRAND NAME	LCA STATUS	PRICE
IMIPRAMINE TAB 10MG	21504	NOP	NOVO-PRAMINE TAB 10MG	F	
	360201	APX	APO-IMIPRAMINE TAB 10MG	F	
LITHIUM CARBONATE SR TAB 300MG	2266695	APX	APO-LITHIUM CARBONATE SR TAB 300MG	F	
	590665	JSO	DURALITH® TAB 300MG	P	$0.1384
MIRTAZAPINE TAB 15MG	2256096	GPM	GEN-MIRTAZAPINE TAB 15MG	F	
	2248542	ORG	REMERON RD™ TAB 15MG	P	$0.3892
	2250594	RXP	RHOXAL-MIRTAZAPINE 15MG	P	$0.3892
**MIRTAZAPINE TAB 45MG	2248544	ORG	REMERON RD™ TAB 45MG	P	$1.1676
	2256126	GPM	GEN-MIRTAZAPINE TAB 45MG	P	$1.1676
RANITIDINE HCL INJ 25MG/ML	2256711	SIL	RANITIDINE INJECTION 25MG/ML	F	
	2212366	UNK[3]	ZANTAC® INJ 25MG/ML	P	$1.1936
*TIZANIDINE HCL TAB 4MG	2259893	APX	APO-TIZANIDINE TAB 4MG	F	
	2239170	UNK[4]	ZANAFLEX® TAB 4MG	P	$0.5293
VANCOMYCIN HCL VIAL 500MG	2241820	PMS	PMS-VANCOMYCIN HCL 500MG	F	
	2139375	UNK[5]	STERILE VANCOMYCIN HCL 500MG	P	$23.1452
VANCOMYCIN HCL VIAL 1G	2241821	PMS	PMS-VANCOMYCIN HCL 1G	F	
	2139383	UNK[5]	STERILE VANCOMYCIN HCL 1G	P	$46.2696

* — Requires Special Authority (please refer to the PharmaCare Web site for criteria).

** — LCA price for Mirtazapine tab 45MG is set at three times the LCA price for the Mirtazapine tab 15MG product.

3 — Glaxosmithkline Inc.

4 — Elan Pharmaceuticals Inc.

5 — Pharmaceutical Partners of Canada Inc.

LCA/RDP Booklet Changes

Please be advised that, effective **June 20, 2005**, the following changes will be made to LCA Category prices (partial reimbursement prices) and/or the benefit status of drugs within an LCA category.

CATEGORY		NEW LCA PRICE	NEW STATUS
OXYCODONE TAB 5/325MG			
608165	RATIO-OXYCOCET TAB 5/325MG		F
DEXAMETHASONE TAB 0.5MG			
2261081	APO-DEXAMETHASONE TAB 0.5MG		F
MIRTAZAPINE TAB 30MG			
2256118	GEN-MIRTAZAPINE TAB 30MG	$0.8359	P
2259354	NOVO-MIRTAZAPINE TAB 30MG		F
2248762	PMS-MIRTAZAPINE TAB 30MG		F
2248543	REMERON RD™ 30MG		F
2243910	REMERON® TAB 30MG	$0.8359	P
2250608	RHOXAL-MIRTAZAPINE TAB 30MG	$0.8359	P

Limited Coverage Program

The following new products have been included as eligible PharmaCare benefits under the Limited Coverage Program by **Special Authority only** (please visit the PharmaCare Web site for criteria):

DIN	MAN	DRUG NAME
2443079	LIL	HUMATROPE® (somatropin) 24MG cartridge
2249002	HLR	NUTROPIN AQ PEN® (somatropin injection) 10MG/2ML pen cartridge
2253410	HLR	PEGASYS® RBV™ (peginterferon alfa-2a plus ribavirin) 180MCG/ML (vials) – 200MG/tab
2253429	HLR	PEGASYS® RBV™ (peginterferon alfa-2a plus ribavirin 180MCG/0.5ML (pre-filled syringe) – 200MG/tab
2254573	SCH	PEGETRON™ REDIPEN (peginterferon alfa-2b Powder for Solution in Redipen Single Dose Delivery System plus ribavirin) 50MCG/0.5ML – 200MG/cap
2254581	SCH	PEGETRON™ REDIPEN (peginterferon alfa-2b Powder for Solution in Redipen Single Dose Delivery System plus ribavirin) 80MCG/0.5ML – 200MG/cap
2254603	SCH	PEGETRON™ REDIPEN (peginterferon alfa-2b Powder for Solution in Redipen Single Dose Delivery System plus ribavirin) 100MCG/0.5ML – 200MG/cap
2254638	SCH	PEGETRON™ REDIPEN (peginterferon alfa-2b Powder for Solution in Redipen Single Dose Delivery System plus ribavirin) 120MCG/0.5ML – 200MG/cap
2254646	SCH	PEGETRON™ REDIPEN (peginterferon alfa-2b Powder for Solution in Redipen Single Dose Delivery System plus ribavirin) 150MCG/0.5ML – 200MG/cap
2243088	LIL	ZYPREXA®-ZYDIS® (olanzapine orally disintegrating) 15MG tablet

Benefits

The following new products are now eligible PharmaCare benefits for Plans B, C, F, I and, if applicable, Plan G.

DIN	MAN	DRUG NAME
2247916	YNO	CIPRO® XL™ Modified Release Tablets (ciprofloxacin) 500MG
2251787	YNO	CIPRO® XL™ Modified Release Tablets (ciprofloxacin) 1000MG
2258528	FRS	EDECRIN® (ethacrynic acid) 25MG tablets
2250527	NVR	LESCOL XL® (fluvastatin sodium) 80MG extended release tablets
2247704	JSO	RISPERDAL® M-TAB™ (risperidone orally disintegrating tablets) 0.5MG
2247705	JSO	RISPERDAL® M-TAB™ (risperidone orally disintegrating tablets) 1MG
2247706	JSO	RISPERDAL® M-TAB™ (risperidone orally disintegrating tablets) 2MG